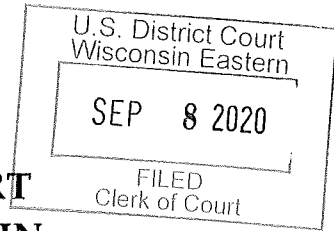


**COMPLAINT**  
(for non-prisoner filers without lawyers)

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**



(Full name of plaintiff(s))

Leila Marie McCoy

v.

Case Number:

(Full name of defendant(s))

Appleton Housing Authority

(to be supplied by Clerk of Court)

Kim Esselman Individual and Professional Capacity  
Kari Godsill Individual and Professional Capacity  
Debra Dillenberg Individual and Professional Capacity

**A. PARTIES**

1. Plaintiff is a citizen of Colorado and resides at  
(State)

General Delivery Arvada Colorado 80004  
(Address)

(If more than one plaintiff is filing, use another piece of paper.)

2. Defendant Appleton Housing Authority  
(Name)

is (if a person or private corporation) a citizen of Wisconsin

and (if a person) resides at 925 West Northland Ave. Appleton, WI 54914

(State, if known)  
(Address, if known)

and (if the defendant harmed you while doing the defendant's job)

worked for Appleton Housing Authority & Appleton WI 54914  
(Employee's name and address, if known)

(If you need to list more defendants, use another piece of paper.)

B. STATEMENT OF CLAIM

On the space provided on the following pages, tell:

1. Who violated your rights;
2. What each defendant did;
3. When they did it;
4. Where it happened; and
5. Why they did it, if you know.

1. Appleton Housing Authority, Kim Esselman HCV specialist, Debra Dillenberg and Kar

2. Appleton Housing Authority: discriminated against me on the basis of disability race a

Reasonable accommodations for my disabilities and chronic health conditions. Illegally c

For filing a legitimate Americans with Disabilities Act complaint. Kim Esselman: discrimir

My Ginger and status as a woman victim of domestic violence and human trafficking, de

Accommodation and deprived me of access to public housing benefits in retaliation for A

Deprived me of access to Federal housing benefits, intimidated and h threats of legal

Action and the agency lawyer because I requested reasonable accommodation in the el

Leasing process in order to use adaptive software for the blind. Denied me accessible fc

Kari Godsill denied me access to public housing benefits in retaliation for legitimate Ada

Dates of Discrimination : July 2020 - 09/04/20

- ① Discriminated against me based on gender, disability and race
- ② Deprived me of Reasonable Accommodations for my blindness chronic health conditions and physical disabilities & those of my children
- ③ Retaliated against me for filing an ADA complaint
- ④ Deprived me of Federal Housing in retaliation for ADA/Civil Rights Complaint
- ⑤ Discrimination based on my participation in Vocational Rehabilitation Employment training for the Blind under SSA/Ticket to Work
- ⑥ 42 USC 1983: Left me and my children homeless/ Denied housing on the street during Pandemic due to my ADA enforcement.

C. JURISDICTION

☒ I am suing for a violation of federal law under 28 U.S.C. § 1331.

OR

☐ I am suing under state law. The state citizenship of the plaintiff(s) is (are) different from the state citizenship of every defendant, and the amount of money at stake in this case (not counting interest and costs) is \$ 250,000.00.

D. RELIEF WANTED

Describe what you want the Court to do if you win your lawsuit. Examples may include an award of money or an order telling defendants to do something or to stop doing something.

\$250,000 - from Appleton Housing Authority  
\$10,000 from each individual Defendant  
Kim Esselman, Debra Dillenberg  
and Kari Godsill

E. JURY DEMAND

I want a jury to hear my case.

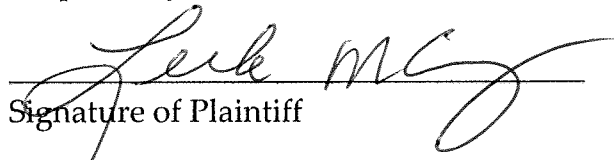
☒ - YES

☐ - NO

I declare under penalty of perjury that the foregoing is true and correct.

Complaint signed this 4th day of September 2020.

Respectfully Submitted,

  
Signature of Plaintiff

816-508-5056

Plaintiff's Telephone Number

Dahlia.619@outlook.com

Plaintiff's Email Address

General Delivery

Arvada, CO 80004

(Mailing Address of Plaintiff)

(If more than one plaintiff, use another piece of paper.)

**REQUEST TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING THE FILING FEE**

☒ I **DO** request that I be allowed to file this complaint without paying the filing fee. I have completed a Request to Proceed in District Court without Prepaying the Filing Fee form and have attached it to the complaint.

☐ I **DO NOT** request that I be allowed to file this complaint without prepaying the filing fee under 28 U.S.C. § 1915, and I have included the full filing fee with this complaint.